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PTO/SB/18 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	15252.2
	First Named Inventor	Nikitin, Alexei V.
	COMPLETE IF KNOWN	
	Application Number	Not Yet Known
	Filing Date	Herewith
	Group Art Unit	Not Yet Known
	Examiner Name	Not Yet Known

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

METHOD AND APPARATUS FOR ANALYSIS OF VARIABLES

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YY)

as United States Application Number or PCT International

(if applicable).

Application Number

and was amended on (MM/DD/YY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not claimed	Certified Copy Attached? YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/223,206	08/04/2000	

[Page 1 of 3]

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DECLARATION ? Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number		27128		OR <input checked="" type="checkbox"/> Correspondence address below	
Name Mark E. Stallion					
Address Blackwell Sanders Peper Martin LLP					
Address 720 Olive Street, Suite 2400					
City St. Louis			State Missouri		ZIP 63101
Country US		Telephone 314-345-6000		Fax 314-345-6060	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Alexei V.			Family Name Or Surname Nikitin		
Inventor's Signature <i>Alexei V. Nikitin</i>			Date 1 Aug 2001		
Residence: City Lawrence		State KS	Country U.S.	Citizenship U.S.	
Mailing Address 2124 Vermont St.					
Mailing Address					
City Lawrence		State KS	ZIP 66046	Country U.S.	
NAME OF SECOND INVENTOR:			<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Ruslan L.			Family Name Or Surname Davidchack		
Inventor's Signature			Date		
Residence: City Stebnik, Lviv Re., 82172		State	Country: Ukraine	Citizenship Ukraine	
Mailing Address 14a Grushevski St., Apt. 113					
Mailing Address					
City Stebnik, Lviv Re., 82172		State	ZIP	Country Ukraine	
<input type="checkbox"/> Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto					

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒ Customer Number 27128 OR ☒ Correspondence address below

Name **Mark E. Stallion**

Address **Blackwell Sanders Peper Martin LLP**

Address **720 Olive Street, Suite 2400**

City **St. Louis**

State **Missouri**

ZIP **63101**

Country **US**

Telephone **314-345-6000**

Fax **314-345-6060**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) **Alexei V.**

Family Name
Or Surname **Nikitin**

Inventor's
Signature

Date

Residence: City **Lawrence**

State **KS**

Country **U.S.**

Citizenship **U.S.**

Mailing Address **2124 Vermont St.**

Mailing Address

City **Lawrence**

State **KS**

ZIP **66046**

Country **U.S.**

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle [if any]) **Ruslan L.**

Family Name
Or Surname **Davidchack**

Inventor's
Signature

Ruslan L Davidchack

Date

07/31/2001

Residence: City **Stebnik, Lviv Re., 82172**

State

Country:
Ukraine

Citizenship **Ukraine**

Mailing Address **14a Grushevski St., Apt. 113**

Mailing Address

City **Stebnik, Lviv Re., 82172**

State

ZIP

Country **Ukraine**

☐ Additional inventors are being named on the __ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	
	Filing Date	
	First Named Inventor	Nikitin, Alexei V.
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	15252.2

I hereby appoint:

☒ Practitioners at Customer Number 27128 → 

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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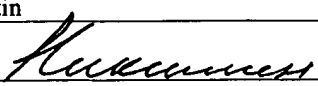
Telephone Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. Se 37 CFR 3.7.1.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Alexei V. Nikitin
Signature	
Date	1 August 2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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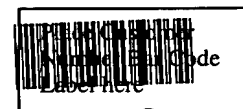
POWER OF ATTORNEY OR AUTHORIZATION OF AGENT	Application Number	
	Filing Date	
	First Named Inventor	Nikitin, Alexei V.
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	15252.2

I hereby appoint:

☒ Practitioners at Customer Number

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OR

☐ Practitioner(s) named below:

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Individual Name

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Country

Telephone

Fax

I am the:

☐ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.7.1.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name

Ruslan L. Davidchack

Signature

Ruslan L. Davidchack

Date

07/31/2001

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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